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|--|---|---|---|----------|---|----------|---|----------|--|----------|--|----------|-------------------------------|--|--|---|--|--|---|--|--|---|--|--|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>  |   | Docket Number (Optional)<br>2269-6103US (03-0954.00/US) |   |          |   |          |   |          |  |          |  |          |                               |  |  |   |  |  |   |  |  |   |  |  |
|   | In re Application of Morrison et al.  |   |   |          |   |          |   |          |  |          |  |          |                               |  |  |   |  |  |   |  |  |   |  |  |
|  | Application Number 10/797,647   | Filed March 10, 2004                                    |   |          |   |          |   |          |  |          |  |          |                               |  |  |   |  |  |   |  |  |   |  |  |
|  | For SEMICONDUCTOR BGA PACKAGE HAVING A SEGMENTED VOLTAGE PLANE AND METHOD OF MAKING |   |   |          |   |          |   |          |  |          |  |          |                               |  |  |   |  |  |   |  |  |   |  |  |
|  | Group Art Unit<br>2822  | Examiner<br>M. Lewis                                    |   |          |   |          |   |          |  |          |  |          |                               |  |  |   |  |  |   |  |  |   |  |  |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table style="width: 100%;"><tr><td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td style="text-align: right;">\$120.00</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td style="text-align: right;">\$ _____</td></tr></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>20-1469</u>.</p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71</p> <p style="padding-left: 40px;">Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).</p> <p style="padding-left: 40px;">Registration number if acting under 37 CFR 1.34(a).</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div style="text-align: center;"><u>December 18, 2006</u><br/>Date</div><div style="text-align: center;"><br/>Signature</div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="text-align: center;">120.00 <small>QP</small></div><div style="text-align: center;">Jeff M. Michelsen    Reg. No. 50,978<br/>Typed or printed name</div></div> <p><small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</small></p> <p><input type="checkbox"/> *Total of _____ forms are submitted.</p> <tr><td colspan="3" style="text-align: center;"><b>CERTIFICATE OF MAILING</b></td></tr> <tr><td colspan="3">Express Mail Label Number: <u>EL995985143US</u></td></tr> <tr><td colspan="3">Date of Deposit: <u>December 18, 2006</u></td></tr> <tr><td colspan="3">Person Making Deposit: <u>Diane Sanders</u></td></tr> |   |   | <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120.00 | <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$ _____ | <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$ _____ | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$ _____ | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$ _____ | <b>CERTIFICATE OF MAILING</b> |  |  | Express Mail Label Number: <u>EL995985143US</u> |  |  | Date of Deposit: <u>December 18, 2006</u> |  |  | Person Making Deposit: <u>Diane Sanders</u> |  |  |
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))  | \$120.00  |   |   |          |   |          |   |          |  |          |  |          |                               |  |  |   |  |  |   |  |  |   |  |  |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))  | \$ _____  |   |   |          |   |          |   |          |  |          |  |          |                               |  |  |   |  |  |   |  |  |   |  |  |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))  | \$ _____  |   |   |          |   |          |   |          |  |          |  |          |                               |  |  |   |  |  |   |  |  |   |  |  |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))   | \$ _____  |   |   |          |   |          |   |          |  |          |  |          |                               |  |  |   |  |  |   |  |  |   |  |  |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))   | \$ _____  |   |   |          |   |          |   |          |  |          |  |          |                               |  |  |   |  |  |   |  |  |   |  |  |
| <b>CERTIFICATE OF MAILING</b>  |   |   |   |          |   |          |   |          |  |          |  |          |                               |  |  |   |  |  |   |  |  |   |  |  |
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